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Bib Data Sheet

CONFIRMATION NO. 5399

SERIAL NUMBER 09/980,517	FILING DATE 02/28/2002 RULE	CLASS 370	GROUP ART UNIT 2661	ATTORNEY DOCKET NO. SONYJP-150
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APPLICANTS
 Kenji Inose, Tokyo, JAPAN;
 Keiji Fukuzawa, Chiba, JAPAN;

**** CONTINUING DATA *******
 THIS APPLICATION IS A 371 OF PCT/JP01/01489 02/28/2001

**** FOREIGN APPLICATIONS *******
 JAPAN 2000-054269 02/29/2000
 JAPAN 2000-305518 10/03/2000

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY JAPAN	SHEETS DRAWING 16	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 2
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ADDRESS
 000530

TITLE
 Receiving device and receiving method

FILING FEE RECEIVED 1020	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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CONFIRMATION NO. 5399

SERIAL NUMBER 09/980,517	FILING DATE 02/28/2002 RULE	CLASS 370	GROUP ART UNIT 2631	ATTORNEY DOCKET NO. SONYJP-150
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APPLICANTS
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Keiji Fukuzawa, Chiba, JAPAN;

**** CONTINUING DATA *******
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35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS
000530

TITLE
Receiving apparatus and receiving method

FILING FEE RECEIVED 1020	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit